

## **FY 2018 NORTH DAKOTA WIC PROGRAM GOALS AND OBJECTIVES**

**I. Administration Goal: Provide the administrative tools necessary to ensure quality WIC services are provided effectively and efficiently.**

### **MIS**

Objective 1: Maintain ND WIC System (LegenDS) to enhance program efficiency and accountability.

#### Activities

1. Continue participation with the Mountain Plain Steering Committee (MPSC) User Group by participating on calls, attending meetings and participating in committees. Colleen and Kristi are members of the ESC (Executive Steering Committee) and Kristi is a member of the CCB (Change Control Board) and Vendor Management Strategic Planning Group.
2. Continue to participate in the release management process, by testing system releases and moving them into our test and production environments. Bring forward any change ideas to the MPSC that would benefit ND WIC.
3. Continue providing help desk services for staff.
4. Continue to acquire new computers for local agency staff and assist them in installing MICR (magnetic ink character recognition) printers and signature pads.
5. Engage additional technical support through a contractor to help identify and resolve system deficiencies.
6. Explore what changes will need to be made in our MIS to implement Electronic Benefit Transfer (EBT) – organization of foods, etc.

## **WIC Electronic Benefit Transfer- EBT**

Objective 1: Ensure that ND WIC is ready for EBT by the 2020 deadline

### Activities

1. Continue to build capacity for Carley Metzger, ND WIC EBT/Vendor Specialist, by participating in appropriate national and regional training and conferences, and by visiting other EBT states to learn about the EBT processes.
2. With the EBT planning funding award, acquire the UPC Manager System and scanners to begin collecting Universal Product Code's (UPC) and Product Look Up's (PLU) for allowable products.
3. Receive final approval from the USDA Regional Office staff on the Implementation Advanced Planning Document Update (IAPDU) and submit funding request to Grants.gov.
4. Select the existing procurement opportunity for implementation contractor.
5. Release an EBT Quality Assurance (QA) Contractor Request for Proposal (RFP) to monitor EBT project status indicators.
6. Other EBT related identified activities anticipated in the coming fiscal year, and those that may overlap the current fiscal year include:
  - Identify local staff who will make up the EBT Direct Users Committee (DUC) to advise on EBT planning and rollout
  - Identify the project manager from Information Technology Department to oversee the project and help navigate through the ND required procedures and work with the QA contractor
  - Review the EBT functional requirements document for ND EBT

ND EBT implementation timeline:

- Planning Advanced Planning Document Update (PAPDU) approved March 2017
- Revised IAPDU submitted for approval May, 2017, conditionally approved
- Pilot readiness complete by April 2019
- Pilot complete by June 2019
- Statewide implementation complete by October 2019

## **Vendor/Food Delivery**

Objective 1: Strengthen Vendor Management and the WIC food delivery system.

### Activities

1. Reestablish publication of the ND WIC vendor newsletter – *What's in Your Cart*.
2. Conduct Compliance Buy training and complete the Compliance Buy Handbook.
3. Continue to provide vendors information on product changes, product eligibility, food package changes, etc.
4. Continue annual review of the WIC food list and make updates as needed.
5. Reach out to stores by email and build distribution lists, and establish communication through email and reconnecting with our Vendor Advisory Group.
6. Continue to re-evaluate peer group assignments to ensure vendors are in correct peer groups.

## **Coordination**

Objective 1: Coordinate activities, services, and information with health care providers to improve the quality of life for WIC families.

### Activities

1. Coordinate with the MCH and Chronic Disease nutritionists on initiatives that impact the WIC population.
2. Work with other programs affecting WIC families such as oral health, immunizations, SIDS, optimal pregnancy outcome program, family planning, and injury prevention (car seats, etc.).
3. Share WIC program and outreach information with providers to improve referrals. Referral tools include WIC wall calendars to network with referral agencies and distribution of WIC general eligibility information. Local WIC agency contacts with referral agencies will be collected as part of their annual self-evaluation and quarterly nutrition services reports.
4. Participate with various statewide committees/coalitions including the North Dakota Breastfeeding Coalition, Hunger Free North Dakota, North Dakota Public Health Nutritionists, etc.

## **II. Nutrition Services Goal: Improve the nutrition status of WIC families in North Dakota.**

Objective 1: Provide local agency staff with resources to address obesity prevention and control. May 2017 data from LegeNDS indicates that 60% of pregnant women, 43% of breastfeeding women, and 48% of not breastfeeding women were assigned the overweight women risk code at certification. For children, May 2017 data from LegeNDS indicates that 14% of children were assigned at risk of overweight, or overweight children risk code and 9% were assigned the obese children risk code at certification.

### Activities

1. Continue to include a physical activity segment in the “Turn Off the TV” section of our monthly participant newsletter, the *Pick-WIC Paper*, and revise/develop appropriate physical activity nutrition education cards as needed.
2. Work on the activities listed under nutrition education and breastfeeding promotion and support as it relates to obesity prevention.
3. In their day-to-day interactions with families, WIC staff help address obesity through the following:
  - Personalize nutrition education after a thorough nutrition assessment and make referrals to appropriate health care providers for additional services as needed.
  - Promote nutrition messages that promote healthy weights such as choosing low fat dairy products, increasing intakes of whole grains and fruits and vegetables, appropriate beverage consumption, etc.
  - Collect BMI and provide education or counseling as appropriate.

Objective 2: Provide local agencies with effective nutrition education materials.

### Activities

1. Develop the monthly newsletter with a local agency committee.
2. Develop new and revise current nutrition education materials with a local agency committee.
3. Utilize USDA nutrition concepts (2015-2020 Dietary Guidelines for Americans, MyPlate, FNS core nutrition messages, etc.) when developing nutrition education materials for participants.

Objective 3: Assist local agencies in completing quality nutrition assessments and revitalizing nutrition education.

### Activities

1. Continue to promote the use of [www.wichealth.org](http://www.wichealth.org) for online nutrition education contacts.

2. Continue to provide resources, information, and training to local agency staff to help in providing quality nutrition assessments, education and counseling.
3. Continue to review local agency quarterly nutrition services reports to ensure that quality nutrition services are being performed.
4. Continue to update staff resources in the area of nutrition risk assessment based on the new LegeNDS system.
5. Implement new nutrition risk revision(s) as determined by MPSC schedule.
6. Complete a statewide self-assessment based on the 2013 WIC Nutrition Services Standards.
7. Investigate a training on Heart Button Counseling by Pam McCarthy, MS, RD for the 2018 WIC All Staff Meeting.

### **Breastfeeding Promotion and Support**

Objective 1: Year 2020 objective MICH-21: Increase to at least 81.9% the proportion of mothers who breastfeed their babies in the early postpartum period and to at least 50% the proportion who continue breastfeeding until their babies are 5-6 months old. 2016-17 LegeNDS data (June 2016-May 2017) indicates that 71% of ND WIC moms initiate breastfeeding, but only 24% are still breastfeeding when their infant turns 6 months old. Not enough milk was the reason that most WIC moms decided to stop breastfeeding especially before the first month of life.

#### Activities

1. Provide support for the 14<sup>th</sup> biennial breastfeeding conference in 2018.
2. Provide local agency staff with resources for breastfeeding promotion and support by working with a local agency committee.
3. Provide technical support for the peer counseling programs in Belcourt, Grand Forks, and Dickinson.
4. Continue to work with the North Dakota Breastfeeding Coalition to disseminate breastfeeding promotion and support information to local breastfeeding coalitions.
5. Continue to support local WIC staff in attending advanced breastfeeding training and/or becoming an IBCLC.
6. Continue and expand a pilot test of a breastfeeding backpack project (started by the Southwest WIC Region with Amy Spangler) to increase breastfeeding initiation rates in the Native American population at three local WIC agencies (Turtle Mountain, Dunseith, and Spirit Lake) and in the rural population at two local WIC agencies (Emmons County and Traill/Steele Counties).
7. Begin a pilot test of single-user electric breast pumps at three local WIC agencies (Upper Missouri District Health Unit, Custer Bismarck, and Grand Forks County).

## **Migrant, Native American, and Homeless Services**

Objective 1: All nutrition initiatives shall meet the special nutrition education needs of non-English speaking participants, migrant farm-workers, Native Americans, and homeless people. June 2017 data (from LegeNDS) indicates that less than 1% of WIC participants are migrant or homeless.

### Activities

1. Invite Tribal WIC programs to attend appropriate WIC/MCH training and meetings.
2. Provide the Standing Rock Sioux Tribe WIC Program with our monthly nutrition education packet.
3. As needed, provide program and nutrition education materials in other languages.
4. Continue to provide local agency access to interpretive services through the Language Line.

## **Drug and Other Harmful Substance Abuse Education and Referral**

Objective 1: Continue to inform WIC families of the dangers of smoking and alcohol consumption during pregnancy and the dangers of secondhand smoke. May 2017 data (from LegeNDS) indicates that 19% of WIC mothers still smoke during their pregnancy with 7% of breastfeeding mothers and 25% of not breastfeeding mothers smoking after the birth of their child. A very small amount of pregnant, breastfeeding, and not breastfeeding mothers, between 0-2% use alcohol or illegal drugs. About 3% of all WIC participants are exposed to smoke in their home.

### Activities

1. Work with the North Dakota Tobacco Program on promoting the ND Quits Program and the Baby & Me Tobacco Free for tobacco cessation.
2. Research a new participant education card or revise the current participant education card on the dangers of secondhand smoke exposure.